

Official

Notes from:	UK Advisory Forum on Ageing 19 March 2014
<p>Chair:</p> <p>Ministers attending:</p> <p>Members:</p> <p>Observing:</p> <p>Officials:</p> <p>Apologies:</p>	<p>Justin Russell/Andrew Latto, Department for Work & Pensions (DWP)</p> <p>Steve Webb, Minister of State for Pensions</p> <p>Philip Hayes, Department for Communities & Local Government (DCLG) Audrey Roy, Department for Environment, Food & Rural Affairs (DEFRA) Iwan Williams, representing Sarah Rochira, Older People's Commissioner for Wales</p> <p>Michael Bond, East of England Forum Barry Wilford, East Midlands Forum Ellen Lebethe, London Forum Norman Jemison, North East Forum Kevan Larkin, North West Forum Jean Gaston-Parry, South East Forum Jackie Allen, South West Forum Anne Bailey, West Midlands Forum John Welham, Yorkshire & Humberside Forum Tom Berney, Scottish Older People's Assembly John Vincent, Welsh Senate of Older People Emily Holzhausen, Carers UK Gilly Crosby, Centre for Policy on Ageing (CPA) Howard Lewis, representing ChangeAGENTS Network UK Limited Alan Beazley, Employers Network for Equality & Inclusion (ENEI) Kevin Halden, Local Government Association (LGA) Prof. Stephen McNair, National Institute of Adult Continuing Education (NIACE) Dot Gibson, National Pensioners Convention (NPC) James Beckles, SENSE Chris Ball, TAEN Tony Watts, AGENDA</p> <p>Peter Coleing, Chair, East of England Forum Mervyn Eastman, Positive Ageing in London (PAiL) Irene Kohler, Positive Ageing in London (PAiL) Wendy Cocks, Care and Repair Brian Warwick, South West Seniors Network Shelagh Marshall, Chair, Yorkshire & Humberside Forum Sara McKee, Evermore Steve Smith, Royal Vountary Service (RVS) Jocelyn-Anne Harvey, Department for Work & Pensions (DWP)</p> <p>Yasna Hawksley, Department for Work & Pensions (DWP) William Davis, Department of Health (DH)</p> <p>Norman Lamb, Minister of State for Care and Support Paul Carnie, Office of Deputy First Minister, representing Junior Ministers Jennifer McCann and Jonathan Bell Claire Keating, Commissioner for Older People for Northern Ireland David Hamilton, Scottish Government Nancy Davies, representing Strategy for Older People, Welsh Assembly Michael Monaghan, Northern Ireland Pensioners Parliament Phyllis Preece, National Partnership Forum for Older People, Wales Caroline Abrahams, Age UK</p>

Notes from:	UK Advisory Forum on Ageing 19 March 2014
Apologies:	Steve Robinson, Beth Johnson Foundation Baroness Sally Greengross, International Longevity Centre – UK (ILC-UK) Raj Jogia, Kensington & Chelsea Forum for Older Residents
Speakers:	Lis Robinson, Department for Work & Pensions (DWP) Lord Filkin, Centre for Ageing Better John Galvin, Firststop Gareth Arthur, Department of Health (DH)
Secretariat:	Gwen Wolf, Department for Work & Pensions (DWP) Ken Cooper, Department for Work & Pensions (DWP)
Meeting Support:	Helen Dimmock, Department for Work and Pensions (DWP) Russell Taylor, Department for Work & Pensions (DWP) John Baker, Department for Work & Pensions (DWP)

**Welcome, Introductions and Update
Justin Russell, Ageing Society and State Pensions Director, DWP**

Justin welcomed everyone to the meeting and introduced John Vincent from the Welsh Senate of Older People.

**Fuller Working Lives – A Framework for Action
Minister of State for Pensions, Steve Webb**

The Minister of State for Pensions suggested that the Budget would include some interesting changes for pensioners which members might be interested to discuss at a future meeting.

Turning to his main topic, the Minister made the point that the key purpose of the Framework for Action on Fuller Working Lives (the title has been changed to more accurately reflect the objective) was to prevent people from dropping out of the workforce in their fifties; for example, those who leave work due to long-term health conditions; those with caring responsibilities, sometimes for both grandchildren and older relatives; and those who have been made redundant. Older workers who have dropped out of the labour market are much less likely than others to re-engage with the labour market. These people do get National Insurance credits to maintain their State Pension, but they miss out on workplace pensions and the opportunity to save

from their wages, which can have a catastrophic impact.

The Framework for Action on Fuller Working Lives will be published later this year to help these groups, and others, to stay in work or, where that is not possible, to stay in touch with the labour market and improve their opportunities for future employment. The focus of the framework is to prevent drop out from the labour market, and when that does happen, to support people back to work. The Minister said that the Framework would be evidence based and include options for working in partnership with local authorities and others to provide the skills necessary for promoting and supporting the local economy. He also outlined the arrangements for the Health and Work Service, which will provide occupational health support and advice to employers, GPs and individuals with the aim of stopping short-term absences becoming long-term absences that ultimately lead to the individual dropping out of the labour market altogether. It's not about forcing people back into work prematurely but about enabling those who want and are able to remain in work to do so and thereby improving their retirement income. Further information on the Health and Work Service tender is available here:

https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/301885/health-and-work-service-specification.pdf

Responding to members questions the Minister advised:

- He would be interested to hear from members on how best to encourage those who might be eligible to claim Pension Credit;
- He was interested to hear more about the NIACE midlife career review (he has since met with them), and explained that DWP's Framework for Action would prioritise training and skills opportunities aimed at preventing people becoming detached from the labour market.
- He was keen to improve opportunities for working carers and therefore interested to hear about the EU funded project 'Negotiating improvements for working carers of adults'. This project recognises there is a need across the EU to better support working carers and that there is an absence of social dialogue and collective bargaining on employment conditions for working carers. The aim is to offer training to workers representatives and to encourage workers organisations to raise these issues with employers. Project partners include TAEN, and Carers UK is an associated partner.

Fuller Working Lives – A Framework for Action Lis Robinson, DWP

Lis gave a short presentation explaining the reality of the labour supply problem and outlined plans for the Framework for Action on Fuller Working Lives, which is due to be published later this year. A copy of Lis's presentation is attached with these notes.

In general discussion members expressed their disappointment that a majority of employers were disengaged from this agenda, and hoped that the Framework for Action would have a practical focus and drive the change in attitude necessary for employers to develop and retain older workers. Members were very positive about the way both the Minister of State for Pensions and the proposals for the Framework for Action viewed caring in terms of economic impact and suggested that a Minister from BIS should attend a future meeting.

Members also discussed a number of the issues raised in groups; the outcome of these discussions is outlined at Annex A.

Introduction to the Centre for Ageing Better Lord Filkin, Centre for Ageing Better

Lord Filkin explained that the Centre for Ageing Better was promoted by both the Government and the BIG Lottery Fund, but that it would be independent of both. And that while, like the other What Works Centres, it had a role in identifying and generating evidence, it would also take a role in making change happen. Lord Filkin expressed the view that an ageing society offered great opportunities and that he saw the Centre's role as equipping and enabling both society and individuals to optimise this great gift of longer life.

The Centre, will receive a £50 million endowment for 10 years of operation, and is currently in development with the expectation of being operational by early 2015. In addition to administrative and practical issues such as the appointment of a Chief Executive, finding accommodation, etc., there is the key question of what to focus on. It is intended, therefore, to use this period of development to engage with the wider community, including both the public and stakeholders, to identify where it is most sensible for the Centre to focus action and what its priorities should be.

The Centre's role is as a catalyst and as a challenge; asking what is it we all need to do? And even a well-endowed centre will need powerful partners to work with it consistently and with commitment to deliver real social change. The Centre will be looking at the availability of good evidence, but will also be looking for genuine commitment from across the various sectors. Generating evidence is a useful thing to do but it doesn't bring about change, so it cannot be the primary role.

Over the next six months the Centre will be listening to older people and people who will be older to help determine what is important; it is a fundamental principle of the way the Centre will work that older people are the solution not the problem.

In discussion with members Lord Filkin confirmed that the area of operation for the Centre would be England, but that all the information and services would be freely available on the internet. He agreed that a lot of positive work had been undertaken

in recent years and that it would be important to undertake a thorough and systematic review of the evidence, recognising that it is as important to know what doesn't work as well as what does. Lord Filkin explained that the Centre had been defined as about ageing rather than older people as the evidence indicates that if you are able to make decisions earlier in later life, then you can have better outcomes than if you make those decisions later on.

Concluding, Lord Filkin said that the Centre would be building a process for wider engagement and might well want to come back to UKAFA again in a few months.

A copy of the note on the Centre for Ageing Better that was provided to members is attached with these notes.

Impact of an Ageing Population on Service Design & Delivery in Rural Areas Audrey Roy, DEFRA

Audrey talked the meeting through a presentation summarising the findings from the research report "Impact of an ageing population on service design and delivery in rural areas". A copy of the full report, commissioned by DEFRA from ILC-UK in conjunction with TNS-BMRB and published on 6 December 2013, is available from ILC-UK: <http://www.ilcuk.org.uk/index.php/publications>.

Concluding Audrey reinforced the importance of older people engaging with their local authority, commissioners and service providers, not only to encourage the recognition and spread of good practice and innovative solutions; but also to reinforce the understanding that older people living in rural areas have different, specific needs and that large numbers of them are living in poverty.

Answering members questions Audrey agreed public transport in rural areas was a concern and that this was an area where some local solutions have been found but not extensively promoted.

A copy of Audrey's presentation is attached with these notes.

Housing in Later Life – Encouraging People to Plan Ahead Philip Hayes, DCLG and John Galvin, Firststop

Philip gave the meeting a short presentation covering the background and current situation related to housing options and choices for older people, including specialist housing. The presentation also raised some questions and assumptions around

planning ahead and informed choices. A copy of this presentation is attached with these notes.

John Galvin outlined the work of Elderly Accommodation Counsel and the route that led to FirstStop, highlighting that for a majority of clients housing is part of a wider range of concerns associated with the impact of ageing. FirstStop delivers a national information and advice service on housing and related support, care and finance for older people through a network of web-based, telephone and face-to-face services. The intention, over time, is to build the network further through local partnerships offering a more intensive personal service, including peer support.

Members raised a number of housing issues in discussion, including:

- the importance of housing providers engaging with older people to better understand their needs;
- learning from housing providers abroad, e.g. in the USA;
- the development of local housing strategies reflecting the needs of local communities;
- the value of mixed housing options within communities;
- the benefits offered by sheltered accommodation;
- the role of Home Improvement Agencies; and
- equity release.

In response to questions raised on the Lifetime Homes standard, Philip advised that, in England, the Lifetime Homes standard applies in London but is only guidance elsewhere. However, local planning authorities can decide to incorporate it into local planning requirements. Members also raised what was referred to as the sustainable homes standard, but there is no such single regulation/guidance. However many local authorities try to apply their own standards, so there is a range of locally determined requirements, some of which are referred to as the sustainable homes standard.

No One Left Alone Gareth Arthur, DH

Gareth gave a presentation on the thinking behind “No One Left Alone”, the Government’s plans for improving out-of-hospital care for the oldest people and those with the most complex needs. (The Government’s plans have subsequently been published under the name “Transforming Primary Care” and are available at <https://www.gov.uk/government/publications/plans-to-improve-primary-care>)

The starting point was to improve care for frail older people using the solid basis offered by general practice. The majority of the population is registered with a GP and general practice receives positive ratings of patient satisfaction. GPs are ideally placed to hold oversight of people’s care outside hospital. The engagement to inform

a plan for older people was launched in July 2013 and included national events, topic-specific roundtables, face to face discussions, and online engagement. Participants included professionals, interest groups, stakeholders and the general public. Feedback from this engagement process moved the focus of the plan beyond age alone, to include others with complex needs.

Currently the plan focuses on those with the most complex health needs, most usually frail older people; but over time the aim is to extend this proactive model to people living with long-term conditions, and eventually to those at risk of premature mortality or chronic illness. Beyond this there is also a need to review, consider and learn from other models of care, e.g. international models of integrated care, and lessons from the integration pioneers and GP access pilots.

Members discussed a number of issues raised by Gareth's presentation. The outcome of these discussions is outlined at Annex B.

Close & Future Meetings Anrew Latto, DWP

Andrew thanked all the day's speakers for their time and commitment; and thanked members for their lively contributions. Members were also reminded to complete their meeting feedback forms.

The next meeting will be on **Wednesday 11 June 2014**; and will be held at EEF Broadway House Conference Centre, Broadway House, Tothill Street, London, SW1H 9NQ (<http://www.eefvenues.co.uk/conference-venues/london/location.aspx>)
The meeting will start at 10.45, with refreshments available from 10.30.

Other UKAFA dates for 2014 are: **Wednesday 17 September 2014**; and **Wednesday 26 November 2014**.

Annex A

Fuller Working Lives – A Framework for Action: outcome from discussion groups

- Members were keen to work with DWP and local partners, etc. but asked for clear, easy to understand and use information to support this.
- Information for carers and their employers needs to be well signposted, easily available and straightforward.
- Keen to see more “joining-up” at a local level, e.g. Health & Wellbeing Boards should also be involved in planning for and promoting this.
- A strong media campaign will be crucial in changing attitudes.
- Keen to see a wider range of training and employment opportunities for older workers.
- There must also be a role for the Age Action Alliance in progressing this area of work.
- Employer’s responsibilities towards carers and an older workforce need to be made more explicit.
- Need to have a clear understanding of, and have the flexibilities to support, carers returning to the workplace.

Annex B

No One Left Alone: outcome from discussion groups

- Need to recognise and support people's capacity to understand and resolve their own health and care problems, and the importance of this in helping self-confidence and psychological resilience.
- Understand the extent and role of informal community support already provided to those with complex needs.
- Proactive care is the cornerstone of this plan – prevention is under-funded, for many reasons, but does maintain health and well-being.
- With the right support and information people can be responsible for their own health, care and well-being.
- Need to challenge commissioners, and service providers over issues such as training, pay and conditions of care givers, and continuity of service to those receiving care.
- Must recognise that some areas are struggling to recruit appropriately qualified professionals, which negatively impacts on the service that can be provided.
- Need to establish clear communication channels and lines of accountability across all those organisations, groups and professionals that might be involved.
- Increase in emergency readmissions last year means we should be moving beyond plans and pilots and taking positive action, funding and replicating successful schemes, e.g. RVS Home from Hospital which has reduced emergency readmissions by half in Leicestershire.
- Need to understand and address perverse funding incentives.
- The aims of personalised and joined-up care have to be replicated in both commissioning and service delivery, currently many essential basic tasks fall “into the gaps”.